

Irrigation Permit Information

- A. It shall be unlawful for any person to install, alter, or modify an irrigation system without first obtaining an irrigation permit. Permits are required both in the city limits and the extra territorial jurisdiction (ETJ).
- B. Irrigators must be licensed with the State of Texas and registered with the City of Huntsville before a permit can be obtained.
- C. To obtain a permit, the installer (licensed irrigator) will need to submit a plan of the system with his/her irrigator's seal to the City.
- D. Permit Fees are as follows:
Base Fee (includes first 5 heads)..... \$2.00
Over 5 lawn sprinkler heads..... 20¢
- E. The sprinkler system can tie into the existing meter or to a separate water tap. If the existing water meter is used for both the home and the sprinkler system, the sewer charge on the utility bill will increase with the extra water usage from the sprinkler system. If there is a separate water tap and meter put in exclusively for the sprinkler system, that particular utility bill will not have any sewer charges, only water usage.
- F. The placement of the required backflow preventer will be inspected by a City inspector, however, before the inspection can be approved, the installer must have a State licensed "backflow preventer assembly tester" perform a test on the backflow preventer and certify that it works properly. The original backflow device test report must be submitted to the permit office prior to scheduling an inspection.



Registration of Backflow Prevention Assembly Tester

Name of Company: _____

Phone number: _____

Mailing Address: _____

City, State, Zip: _____

The following documents must be attached:

- () Copy of valid Testers License
- () Copy of Valid Gauge Calibration Test
- () Copy of Fire Marshal Certification if Testing Fire related systems
- () Do you want to be placed on the public list of testers?

Note: Test records are kept for three years. Repairs must be made using only the manufacture's replacement parts. The *ORIGINAL* test reports must be submitted to the City of Huntsville Central Inspections at 448 SH 75 North Huntsville, TX 77320.

City of Huntsville

Central Inspections

Backflow Prevention Assembly Test And Maintenance Report *

Property Name: _____

Property Address: _____

Contact Name: _____ Contact Phone: _____

Mailing Address: _____

The backflow prevention assembly detailed below has been tested and maintained as required by commission regulations and is certified to be operating within acceptable parameters.

Type of Assembly

- | | |
|---|--|
| <input type="checkbox"/> Reduced Pressure Principle | <input type="checkbox"/> Reduced Pressure Principle-Detector |
| <input type="checkbox"/> Double Check Valve | <input type="checkbox"/> Double Check-Detector |
| <input type="checkbox"/> Pressure Vacuum Breaker | <input type="checkbox"/> Spill-Resistant Pressure Vacuum Breaker |

Manufacturer: _____ Size: _____

Model Number: _____ Located At: _____

Serial Number: _____

Is the assembly installed in accordance with manufacturer recommendations and/or local codes? _____

	Reduced Pressure Principle Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at ____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at ____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at ____ psid Did not Open <input type="checkbox"/>	Opened at ____ psid Did not Open <input type="checkbox"/>	Held at ____ psid Did not Open <input type="checkbox"/>
Repairs and Materials Used**					
Test After Repair	Held at ____ psid Closed Tight <input type="checkbox"/>	Held at ____ psid Closed Tight <input type="checkbox"/>	Opened at ____ psid	Opened at ____ psid	Held at ____ psid

Remarks: _____

Test Gauge Information

Make/Model _____ S/N: _____

Last Calibration Test Date: _____ Remarks: _____

The above information is certified to be true at the time of testing.

Firm Name: _____ Certified Tester: _____

Firm Address: _____ Cert. Tester No. _____ Exp: _____

Firm Phone #: _____ Date of test: _____

*TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

**USE ONLY MANUFACTURER'S REPLACEMENT PARTS

SEND ORIGINAL TO: **Central Inspections**; 448 State Hwy 75 North, Huntsville, TX 77320